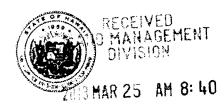
NEIL ABERCROMBIE GOVERNOR STATE OF HAWAIT



JOBIE M. K. MASAGATANI CHAIRMAN DESIGNATE HAWAIIAN HOMES COMMISSION

MICHELLE K. KAUHANE DEPUTY TO THE CHAIRMAN

STATE OF HAWAI'I

DEPARTMENT OF HAWAIIAN HOME LANDS

P O- BOX 1879 HONOLULU, HAWAIT 96805

REQUEST FORM FOR NON-HOMESTEADING LAND USE PURPOSES

PART I: APPLICANT INFORMATION						
Name: Ka Hale L	aa O Ierusc	alema Hou Church				
Address: PO BOX	142 Kaunai	KaKai H1 96748				
Phone No.: 558. 839	73 Cell:	EKAKAI H1 96748 email:				
If Corporation/Organizatio	on/Company/LLC/Non	n-Profit:				
Name:						
Address:						
Phone No.:	Cell:	email:				
Requesting Organiza	tion is a Non-Profit					
Type of Non-Profit:	Private Nonprofit – governed by self appointed board Member Nonprofit – governed by voting members Homestead Organization – governed by HHCA beneficiary members					
Requesting Organizat	tion is For Profit - Inc	dividual or Business				
Individual	Sole Proprietors	rship Partnership				
Corporation	Limited Liabilit	ity Corporation				
Is an Individual HHC.	A Beneficiary or is O	Owned by an HHCA Beneficiary Yes No				
Requesting Organizat						
Federal	State	County				
Mission of Organization:						
		1:				
Federal Tax ID#:	State	te Tax ID#:				
PART 2: NON-HOMEST	EADING LAND USE	E REQUEST				
Describe proposed non-hom Laa 0 lerusalen	esteading land use env	visioned under this request as submitted Ka Hale ich currently occupy's . 588 acres.				
We are requesting our religious	ng 412 acres Institute	s to complete one acre of				
*Please attach additional informa						

Land Area requested: Act	reage/Sq.Ft4	412	Term:	
Island: <u>MoloKai</u>	Tax Map Key No.	: 520320	69	
Indicate Character of Use: Agricultural Pastoral	☐ Commercial ☐ Industrial	□ CI	hurch	
Does applicant have any exiuse purposes? Yes 1	sting land disposition		iian home lands for non-homesteadin	g
If yes, under what type of us	se and disposition:/	Religious	Institute	
Describe how proposed land its Beneficiaries (Applicants	use request will have & Lessees):	e direct or signific	cant indirect benefit to the Trust and/o	or
 This is an application pro DHHL and may require a This request does not con 	acknowledges that: acess that will be subjudditional information	ect to further revi	e of Hawaiian home lands under non- iew, evaluation and consideration by this non-homesteading land use requ	
in accordance with the Ha	awaiian Homes Comr waii Revised Statutes	nission Act (Sect	cise its prudent authority pursuant to tion III, Section 204(a)(2), Section s amended and the Hawaii	anc
 Once the application is de 30 day review period on t 	eemed complete, the r he DHHL website for	r beneficiary and	g land use request will be posted for a public comment;	l
Beneficiary Consultation	Policy; ved will be provided t		will be required per the DHHL Homes Commission if/when approval	
 Associated non-refundable disposition request as follows: 	e processing and docu		shall be assessed for each respective	
	License - \$200.00	General Lease – Co	ost Documentation (all)\$75.00	
Gayla Ann Hall			3-20-2013	
Print Individual or Organiza	ation Name	Ι	Date	
Duylat Remail	Clay - 1		mugla Humal lyd	7
yuthorised Representative N	Name' & Tille	/ S	Signature 13:074	
		2 L	Land Request Form No. 13: 074	